SUF VIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO: **Bayfield County** Planning and Zoning Depart. PO Box 58 Washburn, WI 54891

(715) 373-6138

APPLICATION FOR PERMIT

BAYFIELD COUNTY, WISCONSIN Date Stamp (Received) FEB 23 2018 Bayfield Co. Zoning Dept

Permit #:	18-0044
Date:	3-8-18
Amount Paid:	\$75 3-7-18
Refund:	

INSTRUCTIONS: No permits will be issued until all fees are paid.

			LET EIMITS I	AVE BEEN ISSUED		ICANT.							
TYPE OF PERMIT R	EQUEST	TED→	LAND	USE SA	NITARY	The second second	□ C	ONDITIONA		CIAL USE	☐ B.O.A.	□ ОТН	IER
Owner's Name:	,	,	. ,			ng Address:	- 10		State/Zip:		- -	lephone:	73 -1APA
Michae	/	5. /	tarve	<i>Y</i>		100 Stre	ech e	r Kol W	ashburn	WI.	109	() ーン/ Il Phone:	73-1069
Address of Property:		01		\	City/S	tate/Zip:	, ,7	- 1000					-4505
14000 SPrec	ner	Ka			Contr	ShbUln (actor Phone:	WI	548) mber:	9/			mber Pho	
Contractor:	18					1917 -4505	Piu	mber:			PIL	imber Pho	ne:
Authorized Agent: (F	Person Sign	ning Appli	cation on behal	f of Owner(s))	-	Phone:	Age	ent Mailing Ad	dress (include City/	State/Zip):	Att	ritten Auth tached	
PROJECT					Tax ID	# 2 6 6				Recorded	d Document: (i.	Yes 🗆 Ne. Property	
PROJECT LOCATION	Legal	Descrip	tion: (Use T	ax Statement)		- 306	7	7		104		61	
<u>SW</u> 1/4, _	NK	1/4	Gov't	Lot Lot(s) CSI	VI Vol & Pa	age	Lot(s) No	. Block(s) No.	Subdivisi	on:		
Section 05	3,	Townshi	48	N, Range <u>0</u> 5	w	Town of:		hburn	-	Lot Size		Acreage 5	
			7										
				n 300 feet of Ri of Floodplain?		am (incl. Intermitte escontinue —	52.0	Distance Stru	cture is from Sho	reline : feet	Is Property		re Wetlands
☐ Shoreland —	S			n 1000 feet of I				Distance Stru	cture is from Sho		Floodplain Z		Present?
						escontinue –	-			feet	No		No
Non-Shoreland													
Value at Time													
Value at Time of Completion								# of		What Ty	pe of		Type of
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donated time & material								structure	Is	on the p	roperty?		property
meterial	Nev	v Cons	truction	1-Story		Basement	t	1	☐ Municipal/	City			☐ City
	☐ Add	dition/	Alteration	☐ 1-Story +	- Loft	Foundation	on	_ 2		(New) Sanitary Specify Type:			
3200.00		version	34	☐ 2-Story		V POST FRUM	ne	□ 3	Sanitary (E	xists) Spe	cify Type: Ho	lding	
			xisting bldg)								ulted (min 20	0 gallon)	
	_	ı a Busi perty	ness on			Use None Portable (w/ser					ontract)		_
		perty											-
			7 1 2 2 3 3 3 3										
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v.						ture on proper	ty)			(Х)	
			Residence	e (i.e. cabin, h	unting s	shack, etc.)				1 (X)	
with Loft with a Porch									1	V	Y		
Residential	Useice			with a Porc	ch					(X)	
			71	with a Pord with (2 nd) F						(X X X)	
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MAR 0.7 Commercial Municipal U	2018 Susseff See	(including d accuracy on this info	Mobile H Addition Accessory Accessory Special U: Condition Other: (e) FAILURE TO any accompanying of all information rmation I (we) an ose of inspection	with (2 nd) F with a Dec with (2 nd) F with Attac se w/ (sanita ome (manufac /Alteration (s /Building (s /Building Add se: (explain) al Use: (explain kplain) OBTAIN A PERMI g information) has b I (we) am (are) providing in o (are) providing in o	Porch k Deck hed Gar ary, or [tured da specify) specify) dition/A	sleeping quart te) Library Iteration (special special specia	CON WITT ON WITT On by Baysent to co	HOUT A PERMI of my (our) knowlefield County in de ounty officials cha	T WILL RESULT IN PE	L (L) (L	X X X X X X X X X X X X X X X X X X X	nowledge that liability which to the above	ch may be a e described

(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Strecker Rd Washburn

Date _

Copy of Tax Statement

If you recently purchased the property send your Recorded Deed

Attach

<u>Draw</u> or <u>Sketch</u> your <u>Property</u> (regardless of what you are applying for) Show Location of: **Proposed Construction** Show / Indicate: North (N) on Plot Plan (2)

(3) Show Location of (*): (*) Driveway and (*) Frontage Road (Name Frontage Road) (4) Show:

All Existing Structures on your Property Show:

(*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P) (5) Show any (*): (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond (6)

Show any (*): (7)(*) Wetlands; or (*) Slopes over 20%

Morth riveway Wood

Please complete (1) – (7) above (prior to continuing)

(8) Setbacks: (measured to the closest point)

s in plans must be approved by the Planning & Zoning Do

Description	Measurement	Description	Measurement
Setback from the Centerline of Platted Road	481 Feet	Setback from the Lake (ordinary high-water mark)	Feet
Setback from the Established Right-of-Way	3 / Feet	Setback from the River, Stream, Creek	100 or More Feet
		Setback from the Bank or Bluff	52' Feet
Setback from the North Lot Line	3/ Feet		
Setback from the South Lot Line	200'or Move Feet	Setback from Wetland	Feet
Setback from the West Lot Line	481 Feet	20% Slope Area on the property	Yes No
Setback from the East Lot Line	156 Feet	Elevation of Floodplain	Feet
Setback to Septic Tank or Holding Tank	62 Feet	Setback to Well	72' Feet
Setback to Drain Field	Feet		
Setback to Privy (Portable, Composting)	Feet		

other previously surveyed corner or marked by a licensed surveyor at the owner's expense

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code. The local Town, Village, City, State or Federal agencies may also require permits.

Issuance Information (County Use Only)	Sanitary Number:	#	# of bedrooms:	Sanitary Date:				
Permit Denied (Date):	Reason for Denial:	E 7						
Permit #: 18 - 0044	Permit Date: 3-8-1	-18						
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming Yes (Deed of Recor	ious Lot(s)) No	Mitigation Required Mitigation Attached		Affidavit Required Affidavit Attached Yes No No				
Granted by Variance (B.O.A.) ☐ Yes No Case #:		Previously Granted by Ves No	y Variance (B.O.A.) Case	±#:				
Was Parcel Legally Created Was Proposed Building Site Delineated. ✓ Yes □ No		Were Property Line	es Represented by Owner Was Property Surveyed	Yes No				
Inspection Records represented by the a	pplicant			Zoning District (A5 l) Lakes Classification (—)				
Date of respectioned may be issued pen	Inspected by:	obert Schieman Date of Re-Inspection:						
Condition(s): Town, Committee or Board Conditions Atta	Car hun	red hab	: tetlor	0.1				
011/0	Most M	Alutein 3	.0' Setback	to North PL				
Signature of Inspector:				Date of Approval: 3 7 18				
Hold For Sanitary:	Hold For Affida	vit: 🗆	Hold For Fees: 🗆					

City, Village, State or Federal May Also Be Required

SANITARY SIGN SPECIAL CONDITIONAL BOA -

BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

No.	o. 18-0044 Issued To: Michael Harve														
S ½ W ½ l Location:			of	NW	1/4	Section	8	Township	48	N.	Range	5	W.	Town of	Washburn
									1		-				
Gov't Lot			L	.ot		Blo	ock	Sul	bdivisio	on				CSM#	

For: Residential Accessory Structure: [1- Story; Wood Shed (20' x 32') = 640 sq. ft.]

(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): Not to be used for human habitation. Must maintain 30' setback to North property line.

NOTE: This permit expires one year from date of issuance if the authorized construction work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete. This permit may be void or revoked if any performance conditions are not

completed or if any prohibitory conditions are violated.

Rob Schierman

Authorized Issuing Official

March 8, 2018

Date

SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:

Bayfield County Planning and Zoning Depart. PO Box 58 Washburn, WI 54891 (715) 373-6138

Address to send permit

APPLICATION FOR PERMIT BAYFIELD COUNTY, WISCONSIN

Date Stamp (Received) FEB 23 2018



Bayfield Co. Zoning Dept

Checks are made pay	able to: Ba	ayfield Co	ounty Zoning D	epartment.	TO APPLI	ICANT.									
TYPE OF PERMIT R	REQUEST	ED-	☐ LAND	USE 🗆 SA	NITARY	□ PRIVY	□ сс	NDITIONA	L USE SPE	CIAL USE	□ B.O	.A. 🗆	OTHER _	TIT:	
Owner's Name:					Mailing	g Address:		City/	State/Zip:			Telepho		NN	
Michael Address of Property:	5.	1491	rvey		94 City/St	700 <i>57</i> 7 tate/Zip:	roke	Rd W	ishburn (VI 5	4391	Cell Pho	323 <i>-10</i> ine:	69	
74700 STI		~ RN	/		Washburn WF 54891						115-292-4505			505	
Contractor:	CONCI	1100			Contractor Phone: Plumber:						Plumber Phone:				
Authorized Agent: (Person Signi	ing Applica	ation on behalf	of Owner(s))	1.0	Agent Phone: Agent Mailing Address (include City/State					e/Zip): Written Authorization Attached			ion	
PROJECT LOCATION	Legal D	Descript	ion: (Use Ta	x Statement)	30617 Re						ecorded Document: (i.e. Property Ownership)			ership)	
<u>5W</u> 1/4, 1	NW	1/4	Gov't	Lot Lot(s	S) CSN	VI Vol & Pag	ge	Lot(s) No.	. Block(s) No.	Subdiv	ubdivision:				
Section 💇	<u>В</u> , то	ownship	48 N	, Range <u>05</u>	_ W	Town of:	sh	burn		Lot Size	2	Acre	age		
				300 feet of Ri f Floodplain?		am (incl. Intermitten	-,	istance Stru	cture is from Sho	oreline : feet		perty in lain Zone?	Are Wet		
☐ Shoreland →	□ Is P	roperty	Land withir	1000 feet of L		d or Flowage escontinue —		istance Stru	cture is from Sho	oreline : feet		Yes No	□ Y		
Non-Shoreland			Tar		109										
Value at Time of Completion * include		Projec	ct	# of Stor	ies	hadrooms					Type of tary Syste		W	pe of later	
donated time & material								structure		s on the	property?		pro	operty	
			ruction	1-Story		□ Basement	_	1	☐ Municipal						
\$.			lteration	☐ 1-Story +	- Loft										
5000°2		version		2-Story		V Pole Bari	n	3	✓ Sanitary (I			-			
			risting bldg)		_	Use		None	□ Portable (IIII 200 gai	1011)	_	
	Prop					Year Round Compost Toile									
									□ None	:4]	
Existing Structure		mit bein	g applied for	r is relevant to	it)	Length:	٦.		Width:	•		leight:			
Proposed Constru	uction:					Length:	30		Width:	20		leight:	16		
Proposed Us	е	1				Proposed Struc					Dimensi	ons	Squa Foota		
						ture on propert	ty)			(X)			
Dan'd fan la	an suga		Residence	e (i.e. cabin, h with Loft	unting s	snack, etc.)				1	X)	-		
Residential	Use Use			with a Por	ch					ì	X	,)			
MAR 07	2018			with (2 nd) I	orch					(Х)			
MAIL	2010			with a Dec	k					(Х)			
_ Secretarial	Staff-			with (2 nd) I						(Х) -			
Commercial	Use	-		with Attac						- (Х	.)			
	-								k food prep facilit	ies) (X)			
						te)				- (X)			
☐ Municipal U	Jse			'Alteration (Barre	•			- (X no v s	201	100		
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			-		in)				UPHALLOS	- 27	х)			
			Other: (ex						SUPPLAN	7	Х	1	79	1	
(are) responsible for th result of Bayfield Cour property at any reason	ne detail and nty relying or nable time for	accuracy on this infor or the purpo	any accompanyin of all information mation I (we) an ose of inspection	g information) has b I (we) am (are) prov n (are) providing in c	peen examing and the per with this a	ned by me (us) and to t nat it will be relied upor application. I (we) cons	he best on by Bay sent to co	of my (our) know field County in de ounty officials ch	IT WILL RESULT IN P ledge and belief it is tru etermining whether to arged with administerion	ie, correct an issue a permi ng county ord	t. I (we) furthe	r accept liabil e access to th	ity which may b e above describ	be a	
Authorized Age	nt:				-	er of authorization)			Date				

Attach
Copy of Tax Statement
If you recently purchased the property send your Recorded Deed

APPLICANT - PLEASE COMPLETE PLOT PLAN ON REVERSE SIDE

box below: Draw or Sketch your Property (regardless of what you are applying for) Show Location of: **Proposed Construction** (2) Show / Indicate: North (N) on Plot Plan (3) Show Location of (*): (*) **Driveway** and (*) **Frontage Road** (Name Frontage Road) (4) Show: All Existing Structures on your Property (5) (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P) Show: Show any (*): Show any (*): (6)(*) Lake; (*) River; (*) Stream/Creek; or (*) Pond (*) Wetlands; or (*) Slopes over 20% (7)vay House

Please complete (1) – (7) above (prior to continuing)

Changes in plans must be approved by the Planning & Zoning Dept.

(8) Setbacks: (measured to the closest point)

Description	Measurement	Description	Measurement
Setback from the Centerline of Platted Road	£29 Feet	Setback from the Lake (ordinary high-water mark)	Feet
Setback from the Established Right-of-Way	50 Feet	Setback from the River, Stream, Creek	100° or More Feet
		Setback from the Bank or Bluff	52 Feet
Setback from the North Lot Line	50 Feet		
Setback from the South Lot Line	200 on Mere Feet	Setback from Wetland	Feet
Setback from the West Lot Line	527 Feet	20% Slope Area on the property	Ves □ No
Setback from the East Lot Line	100 Feet	Elevation of Floodplain	Feet
Setback to Septic Tank or Holding Tank	93 Feet	Setback to Well	100 Feet
Setback to Drain Field	Feet		
Setback to Privy (Portable, Composting)	Feet		

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.

For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits.

Issuance Information (County Use Only)	Sanitary Number:		# of bedrooms:	Sanitary Date:			
Permit Denied (Date):	Reason for Denial:	And the second	discount of				
Permit#: 18-00-15	Permit Date: 3-9	518					
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming Yes (Deed of Recondance Continuo Press) (Fused/Contigue Press) Yes (Pused/Contigue Press)	ious Lot(s)) No	Mitigation Required Mitigation Attached		Affidavit Required Affidavit Attached Yes No			
Granted by Variance (B.O.A.) ☐ Yes ☐ No Case #:		Previously Granted by	y Variance (B.O.A.) Case	#:			
Was Perfel Legally Created Was Proposed Building Site Delineated Was Proposed Building Site Delineated	enditions	Were Property Line	es Represented by Owner Was Property Surveyed	Yes No			
Inspection Record Program to be code com	pliant			Zoning District (A51) Lakes Classification ()			
517118	Inspected by:	Date of Re-Inspection:					
Condition(s): Town, Committee or Board Conditions Atta	Ched? Yes No-(If	No they need to be atta	habitation				
011/	\mathcal{T}						
Signature of Inspector:	1./			Date of Approval: 7 7 18			
Hold For Sanitary: Hold For TBA:	Hold For Affic	davit: 🗆	Hold For Fees:				

City, Village, State or Federal May Also Be Required

LAND USE - X
SANITARY SIGN SPECIAL CONDITIONAL BOA -

BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

No.	18-0)	ls	ssued To: Michael Harvey											
S ½ W ½ Location:			of	NW	1/4	Section	8	Township	48	N.	Range	5	W.	Town of	Washburn
Gov't Lot			L	_ot		Blo	ck	Sul	odivisio	on				CSM#	

For: Residential Accessory Structure: [1- Story; Barn (20' x 30') = 600 sq. ft.; Lean-to (12' x 16') = 192 sq. ft.]

(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): Not to be used for human habitation.

NOTE: This permit expires one year from date of issuance if the authorized construction work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not

completed or if any prohibitory conditions are violated.

Rob Schierman

Authorized Issuing Official

March 8, 2018

Date